

Contact Number:

Quotation Advert

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Opening Date:	2019-05-30	= 0
Closing Date:	2019-06-05	i a
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	Tongaat CHC	V
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is requi	red 07 SANELE NXUMALO LANE TONGAAT 4399	
Date Submitted	2019-05-29	130
ITEM CATEGORY AND DETAILS	3	
Quotation Number:	ZNQ: 40/19/20	
Item Category:	Goods	V
Item Description:	SUPPLY OF SUTURES AS PER THE ATTACHED LIST	
Quantity (if supplies)	N/A	
COMPULSORY BRIEFING SESS	SION / SITE VISIT	
Select Type:	Not Applicable	×
Date:		22.5
Time;		
Venue:		
QUOTES CAN BE COLLECTED FROM:	07 SANELE NXUMALO LANE TONGAAT 4399	
QUOTES SHOULD BE DELIVERED TO:	07 SANELE NXUMALO LANE TONGAAT 4399	
ENQUIRIES REGARDING THE	ADVERT MAY BE DIRECTED TO:	
Name:	MR. S. RAMCHARAN	
Email:	sivendra.ramcharan@kznheałth.gov.za	

O32 944 5054

Finance Manager Name: MS. H. J. NXASANE

Finance Manager Signature: No late quotes will be considered

Print this page

Submit Save Save As... Close Aprint Preview

STANDARD QUOTE DOCUMENTATION OVER R30 000.00

YOU ARE HEREBY INV DATE ADVERTISED: 39 PHYSICAL ADDRESS: .	/05/2019									VI I Y			CE	NIR				
ZNQ NUMBER: 40/19/20 DESCRIPTION																		
CONTRACT PERIOD			VALIDITY	PERI	OD 60	Days												
SARS PIN																		
CENTRAL SUPPLIER DA	TABASE RE	GISTRATIC	N (CSD) N	iO.										1				
UNIQUE REGISTRATION	I REFERENC	CE				·			,									
																	<u> </u>	Ш
DEPOSITED IN THE QUO			•	ADDR	ESS)				********			.,,,,.						
Bidders should ensure consideration.	that quotes	s are delive	ered timeo	usiy to	o the	correc	t add	ress.	If the	e quo	te is	late,	it wi	ill no	t be	acce	pted	l for
The quote box is open from	m 08:00 to 1	5:30.																
ALL QUOTES MUST BE	SUBMITTED	ON THE O	FFICIAL FO	ORMS	– (NO	T TO E	E RE	TYPE	ED)									
THIS QUOTE IS SUBJ PROCUREMENT REGUL CONDITIONS OF CONTF	ATIONS, 20	THE PREFE 11, THE GE	ERENTIAL ENERAL CO	PROC NDITI	CURE IONS (MENT OF COI	POLI NTRA	CY F CT (G	RAMI CC) A	EWOI	RK A IF API	CT / PLIC/	AND ABLE	THE , any	PR (OT)	REFEI HER	REN [*] SPE(TIAL CIAL
	(FAILL	THE FO JRE TO DO	LLOWING SO WILL R								ALIFI	ED)						
NAME OF BIDDER					••••				••••••	.,,,,,						••••		•••
POSTAL ADDRESS		***************************************			*******	*********			*******	1 * 1 * 7 * 7	******	•••••		• • • • • • • • • • • • • • • • • • • •		•••••	•••••	
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E-MAIL ADDRESS		*************					1,,,,,,					* * * * * * * * * *		•••••	•••••			
VAT REGISTRATION NU	MBER (if VA	\T vendor).	***************	· , , ,				• • • • • • • •		.,,							••••	
HAS A B-BBEE STATUS	LEVEL VER	IFICATION	CERTIFICA	ATE BI	EEN S	UBMIT	TED?	(SBC	6.1)						YES	3	NO	
IF YES, WHO WAS THE	<u>CERTIFICAT</u>	TE ISSUED	BY?										[T	ICK A	\PPL	ICAB	LE B	OXJ
AN ACCOUNTING OFFICE A VERIFICATION AGENCY A REGISTERED AUDITO [A B-BBEE STATUS LEVEN TO QUALIFY FOR PREF	CY ACCRED)R V EL VERIFIC	OITED BY THE	HE SOUTH RTIFICATE	AFRIC	CAN A	CCREI	TATI	ION S	YSTE	M (S	ANAS	s);			TED	IN O	RDE	
														. l	YES	بلاغ	NO	Ш

ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS / SERVICES / WORKS OFFERED? [IF YES ENCLOSE PROOF]

OFFICIAL PRICE PAGE FOR QUOTATIONS		
SIGNATURE OF BIDDER [By signing this document I hereby agree to all terms and conditions]	DATE	
CAPACITY UNDER WHICH THIS QUOTE IS SIGNED		

item No	Quantity	Description	Brand &		Price	
		-	model	manufacture	R	(
1		SUTURES AS PER THE		. ,		Ι
		ATTACHED LIST				_
		NB: PLEASE PROVIDE SAMPLES				╀
		NB: PLEASE PROVIDE SAMPLES				+
						İ
		NB:PLEASE PROVIDE ORIGINAL				
		OR CERTIFIED				ľ
		COPY OF BBBEE AND SARS CERTIFICATE.				1
		NB:PLEASE ATTACH CSD PAGE WITH				+
		UNIQUE NUMBERS IN ORDER TO VERIFY				t
		HAND WRITTEN CSD NUMBER.				I
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		14% (Only if VAT Vendor) RICE (VALIDITY PERIOD 60 Days)				

Does This Offer Comply With The Specification?	Does The Article Conform To The S.A.N.S. / S.A.B.S. Specification?	
Is The Price Firm?	State Delivery Period E.G. E.G. 1day, 1week	

Enquiries regarding the quote may be directed to:

Contact Person: MR. S.RAMCHARAN Tel: 032 944 5054

Enquiries regarding technical information may be directed to:

Contact Person: MR.M.C.MALUNGA Tel032 944 5054

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2019 -05- 2 9

DEPARTMENT OF HEALTH
TONGAAT HEALTH CENTRE
PROVINCE OF KWAZULU-NATAL

LIST OF SUTURES

			TOTAL
DESCRIPTION	QUANTITY	UNIT PRICE	PRICE
1. SUTURES CHROMIC CATGUT (TWISTED			
ABSORBABLE TYPE) TAPER POINT - 75 CM			
2/0 - 3.S METRIC - 40 MM 1/2 CIRCLE			
•			
STERILE - 220 - 32 (BOX OF 12) WITH	V 10 DOVES		
EXPIRY DATE / SABS APPROVED	X 18 BOXES		
2, SUTURES 75 CM - REVERSE CUTTING -			
40 MM 1/2 CIRCLE (BROWN CHROMIC			
CATGUT) ABSORBABLE SUTURES -		İ	
STERILE- 214RC- 7S CM METRICS WITH			
EXPIRY DATE / SABS APPROVED (BOX OF			
· · · · · · · · · · · · · · · · · · ·	V 22 DOVES		
12)	X 32 BOXES		
3. SUTURES NYLON - 3/0 - 6324 RC - 24			
MM 3/8 CIRCLE - REVERSE CUTTING - 45			
CM (METRIC 2) - STERILE - BLUE			
MONOFILAMENT NYLON (NON-			
ABSORBABLE) - SABS APPROVED /			
EXPIRY DATE (BOX OF 12)	X 38 BOXES		
4. SUTURES NYLON - 2/0 - 6230RC - 30	V 20 BOVE2		
MM 3/8 CIRCLE - REVERSE CUTTING - 75			
•		1	
CM - (METRIC 3)STERILE (BLUE			
MONOFILAMENT) (NON-ABSORBABLE)	V 20 DOVES		
(BOX OF 12)	X 30 BOXES		
5. SUTURES NYLON - 4/0 - 840- 17-25MM			
(3/8- 25 MM CIRCLE) - CUTTING BLUE 45			
CM - USP (1.5 METRIC)- STERILE			
MONOFILAMENT - NON- ABSORBABLE			-
SURGICALSUTURES - SABS APPROVED /	1		
EXPIRY DATES	X 26 BOXES		
6. SUTURES V93600 - VICRYL RAPID - 3/0	A 20 BOXES		
3/8 REVERSE CUTTING - STERILE - (BOX			
OF 12) WITH SABS APPROVED / EXPIRY			
DATES	V 10 BOVEC		
7. SUTURES 45 CM - MONOCRYL - 5/0 -	X 18 BOXES		
3/8 REVERSE CUTTING - 13 MM- 832033		[
(BOX OF 12)- SABS APPROVED / EXPIRY			
DATES	X 20 BOXES		
P7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A ZO DOALS		
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2019 -05- 29

DEPARTMENT OF HEALTH
TONGAAT HEALTH CENTRE
PROVINCE OF KWAZULU-NATAL

1.	blood relationship, may make an offer or offers in terms of this invitation to quote (includes a price quotation, advertise limited quote or proposal). In view of possible allegations of favouritism, should the resulting quote, or part thereof, be employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authority declare his/her position in relation to the evaluating/adjudicating authority where— the bidder is employed by the state; and/or the legal person on whose behalf the bidding document is signed, has a relationship with persons/a person who evaluation and or adjudication of the quote(s), or where it is known that such a relationship exists between the per on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the quotes.	ed competitive quote, e awarded to persons orised representative are/is involved in the son or persons for or
2.	. In order to give effect to the above, the following questionnaire must be completed and submitted with the quote.	
2.	.1. Full Name of bidder/representative	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2	 7. The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numb employee / persal numbers must be indicated in paragraph 3 below. 8. Are you or any person connected with the bidder presently employed by the state? 8.1. If so, furnish the following particulars: Name of person / director / trustee / shareholder/ member:	TICK APPLICABLE) YES NO
2	Name of state institution at which you or the person connected to the bidder is employed:	
iVot 2	te: Failure to submit proof of such authority, where applicable, may result in the disqualification of the quote.) 2.8.2.2. If no, furnish reasons for non-submission of such proof:	
2	.9. Did you or your spouse, or any of the company's directors / trustees / shareholders / members or their spouses cond state in the previous twelve months?	luct business with the YES NO
2	1.10. Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed may be involved with the evaluation and or adjudication of this quote?	by the state and who
2	.10.1. If so, furnish particulars:	oidder and any person
	employed by the state who may be involved with the evaluation and or adjudication of this quote?	YES NO
2	2.11.1. If so, furnish particulars: 2.12. Do you or any of the directors / trustees / shareholders / members of the company have any interest in any other relate or not they are bidding for this contract? 2.12.1. If so, furnish particulars:	d companies whether YES NO
3 N	 Full details of directors / trustees / members / shareholders. The Department Of Health will validate details of directors / trustees / members / shareholders on CSD. It is the s to ensure that their details are up-to-date and verified on CSD. If the Department cannot validate the information of the considered and passed over as non-compliant according to National Treasury Instruction Note 4 (a) 2016/17. 	uppliers' responsibility on CSD, the quote will
4		
I.	, THE UNDERSIGNED (NAME)CERTIFY THAT TH FURNISHED IN PARAGRAPHS 2.	E INFORMATION
	ACCEPT THAT THE STATE MAY REJECT THE QUOTE OR ACT AGAINST ME SHOULD THIS DECPROVE TO BE FALSE.	LARATION

1ºState* means -

Name of bidder

any national or provincial department, national or provincial public entity or constitution line itiution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999); any municipality or municipal entity;

Signature

provincial legislature;

Position

d) e) national Assembly or the national Council of provinces; or

.......

Date

b)

^{2&}quot;Shareholder" means a person who owns shares in the company and is actively involved in the management of the enterprise or business and exercises control over the enterprise.

SPECIAL CONTRACT CONDITIONS OF QUOTATIONS

1. AMENDMENT OF CONTRACT

1.1. Any amendment to or renunciation of the provisions of the contract shall at all times be done in writing and shall be signed by both parties.

2. CHANGE OF ADDRESS

2.1. Bidders must advise the Department of Health (institution where the offer was submitted) should their address (domicilium citandi et executandi) details change from the time of bidding to the expiry of the contract.

3. GENERAL CONDITIONS ATTACHED TO THIS QUOTATION

- 3.1. The institution is under no obligation to accept the lowest or any quote.
- 3.2. The price quoted must include VAT (if VAT vendor). However, it must be noted that the department reserves the right to evaluate all quotations excluding VAT as some bidders may not be VAT vendors.
- 3.3. The bidder must ensure the correctness & validity of quote:
 - (i) that the price(s), rate(s) & preference quoted cover all for the work/item (s) & accept that any mistakes regarding the price (s) & calculations will be at the bidder's risk
- 3.4. The bidder must accept full responsibility for the proper execution & fulfilment of all obligations conditions devolving on under this agreement, as the Principal (s) liable for the due fulfilment of this contract.
- 3.5. This quotation will be evaluated based on the 80/20 points system, specification & correctness of information. All required documentation must be completed in full and submitted.
- 3.6. Offers must comply strictly with the specification.
- 3.7. Only offers that meet or are greater than the specification will be considered.
- 3.8. Late quotes will not be considered.
- 3.9. Expired product/s will not be accepted. All products supplied must be valid for a minimum period of six months.
- 3.10. A bidder not registered on the Central Suppliers Database or verification has failed will not be considered.
- 3.11. All delivery costs must be included in the quote price, for delivery at the prescribed destination.
- 3.12. Only firm prices will be accepted. Such prices must remain firm for the contract period. Non-firm prices (including rates of exchange variations) will not be considered.
- 3.13. In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point.
- 3.14. In the event of a bidder having multiple quotes, only the cheapest according to specification will be considered. Furthermore a verification will be done to identify if bidders have multiple companies and are quoting (cover-quoting) for this bid. In such instances only the cheapest bid according to specification will be considered.

4. SAMPLES

- 4.1. In the case of the quote document stipulating that samples are required, the supplier will be informed in due course when samples should be provided to the institution. (This decreases the time of safety and storage risk that may be incurred by the respective institution). The bidders sample will be retained if such bidder wins the contract.
- (i) If a company/s who has not won the quote requires their samples, they must advise the institution in writing of such.
- (ii) If samples are not collected within three months of close of quote the institution reserves the right to dispose of them at their discretion.
- 4.2. Samples must be made available when requested in writing or if stipulated on the document,
- (i) If a Bidder fails to provide a sample of their product on offer for scrutiny against the set specification when requested, their offer will be rejected. All testing will be for the account of the bidder.

5. COMPULSORY SITE INSPECTION / BRIEFING SESSION

5.1. (i) (ii)	Bidders who fail to attend the compulsory meeting will be disquared. The institution has determined that a compulsory site meeting	alified from the evaluation process. take place
	Date/Time: Place ution Stamp:	Institution Site Inspection / briefing session Official Full Name: Signature: Date:

6. STATEMENT OF SUPPLIES AND SERVICES

6.1. The contractor shall, when requested to do so, furnish particulars of supplies delivered or services executed. If he/she fails to do so, the Department may, without prejudice to any other rights which it may have, institute inquiries at the expense of the contractor to obtain the required particulars.

7. SUBMISSION AND COMPLETION OF SBD 6.1

7.1. Should a bidder wish to qualify for preference points they must complete a SBD 6.1 document. Failure by a bidder to provide all relevant information required, will result in such a bidder not being considered for preference point's allocation. The preferences applicable on the closing date will be utilized. Any changes after the closing date will not be considered for that particular quote.

8. TAX COMPLIANCE REQUIREMENTS

- 8.1. In the event that the tax compliance status has failed on CSD, it is the suppliers' responsibility to provide a SARS pin in order for the institution to validate the tax compliance status of the supplier.
- 8.2. In the event that the institution cannot validate the suppliers' tax clearance on SARS as well as the Central Suppliers Database, the quote will not be considered and passed over as non-compliant according to National Treasury Instruction Note 4 (a) 2016/17.

9. TAX INVOICE

- 9.1. A tax invoice shall be in the currency of the Republic of South Africa and shall contain the following particulars:
- (i) the name, address and registration number of the supplier;
- (ii) the name and address of the recipient;
- (iii) an individual serialized number and the date upon which the tax invoice is issued;
- (iv) a description and quantity or volume of the goods or services supplied;
- (v) the official department order number issued to the supplier;
- (vi) the value of the supply, the amount of tax charged;
- (vii) the words tax invoice in a prominent place.

10. PATENT RIGHTS

10.1. The supplier shall indemnify the KZN Department of Health (hear after known as the purchaser) against all third-party claims of infringement of patent, trademark, or industrial design rights arising from use of the goods or any part thereof by the purchaser.

11 DENALTIES

11.1. if the supplier fails to deliver any or all of the goods or to perform the services within the period(s) specified in the contract, the purchaser shall, without prejudice to its other remedies under the contract, deduct from the contract price, as a penalty, a sum calculated on the delivered price of the delayed goods or unperformed services using the current prime interest rate calculated for each day of the delay until actual delivery or performance. The purchaser may also consider termination of the contract.

12. TERMINATION FOR DEFAULT

- 12.1. The purchaser, without prejudice to any other remedy for breach of contract, by written notice of default sent to the supplier, may terminate this contract in whole or in part:
- (i) if the supplier fails to deliver any or all of the goods within the period(s) specified in the contract,
- (ii) If the supplier falls to perform any other obligation(s) under the contract; or
- (iii) if the supplier, in the judgment of the purchaser, has engaged in corrupt or fraudulent practices in competing for or in executing the contract.
- 12.2. In the event the purchaser terminates the contract in whole or in part, the purchaser may procure, upon such terms and in such manner as it deems appropriate, goods, works or services similar to those undelivered, and the supplier shall be liable to the purchaser for any excess costs for such similar goods, works or services.
- 12.3. Where the purchaser terminates the contract in whole or in part, the purchaser may decide to impose a restriction penalty on the supplier by prohibiting such supplier from doing business with the public sector for a period not exceeding 10 years.

FAILURE TO COMPLY WITH ABOVE WILL RESULT IN YOUR QUOTE BEING PASSED OVER.

PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2017

This preference form must form part of all quotes invited. It contains general information and serves as a claim form for preference points for Broad-Based Black Economic Empowerment (B-BBEE) Status Level of Contribution

NB: BEFORE COMPLETING THIS FORM, BIDDERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF B-BBEE, AS PRESCRIBED IN THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017.

1. GENERAL CONDITIONS

- 1.1 The following preference point systems are applicable to all quotes:
 - the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and
- 1.2 The value of this quote is estimated to not exceed R50 000 000 (all applicable taxes included) and therefore the 80/20 preference point system shall be applicable.
- 1.3 Points for this quote shall be awarded for:
 - (a) Price; and
 - (b) B-BBEE Status Level of Contributor.
- 1.4 The maximum points for this quote is allocated as follows:

	POINTS
PRICE	80
B-BBEE STATUS LEVEL OF CONTRIBUTOR	20
Total points for Price and B-BBEE must not exceed	100

- Failure on the part of a bidder to submit proof of B-BBEE Status level of contributor together with the quote, will be interpreted to mean that preference points for B-BBEE status level of contribution are not claimed.
- 1.6 The purchaser reserves the right to require of a bidder, either before a quote is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the purchaser.

2. DEFINITIONS

- (a) "B-BBEE" means broad-based black economic empowerment as defined in section 1 of the Broad-Based Black Economic Empowerment Act;
- (b) "B-BBEE status level of contributor" means the B-BBEE status of an entity in terms of a code of good practice on black economic empowerment, issued in terms of section 9(1) of the Broad-Based Black Economic Empowerment Act;
- (c) "bid" means a written offer in a prescribed or stipulated form in response to an invitation by an organ of state for the provision of goods or services, through price quotations, advertised competitive bidding processes or proposals;
- (d) "Broad-Based Black Economic Empowerment Act" means the Broad-Based Black Economic Empowerment Act, 2003 (Act No. 53 of 2003);
- (e) "EME" means an Exempted Micro Enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (f) "functionality" means the ability of a tenderer to provide goods or services in accordance with specifications as set out in the tender documents.
- (g) "prices" includes all applicable taxes less all unconditional discounts;
- (h) "proof of B-BBEE status level of contributor" means:
 - 1) B-BBEE Status level certificate issued by an authorized body or person;
 - A sworn affidavit as prescribed by the B-BBEE Codes of Good Practice;
 - Any other requirement prescribed in terms of the B-BBEE Act;
- (i) "QSE" means a qualifying small business enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (j) "rand value" means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

3. POINTS AWARDED FOR PRICE

THE 80/20 PREFERENCE POINT SYSTEMS 3.1

A maximum of 80 points is allocated for price on the following basis:

$$Ps = 80 \left(1 - \frac{Pt - P\min}{P\min}\right)$$
 Where

Ps Points scored for price of bid under consideration

Price of bid under consideration Ρt Price of lowest acceptable bid Pmin

POINTS AWARDED FOR B-BBEE STATUS LEVEL OF CONTRIBUTOR 4.

In terms of Regulation 6 (2) and 7 (2) of the Preferential Procurement Regulations, preference points must be awarded to a bidder for 4.1 attaining the B-BBEE status level of contribution in accordance with the table below:

B-BBEE Status Level of Contributor	Number of points (80/20 system)
1	20
2	18
3	14
4	12
5	8
6	6
7	4
8	2
Non-compliant contributor	0

_	BID DECLAR	~ A T!~ N
~	MID DECLAR	4 W I II I I I

8.

- Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following: 5.1
- B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED IN TERMS OF PARAGRAPHS 1.4 AND 4.1 6.
- B-BBEE Status Level of Contributor: =(maximum of 20 points) 6.1

(Points claimed in respect of paragraph 7.1 must be in accordance with the table reflected in paragraph 4.1 and must be substantiated by relevant proof of B-BBEE status level of contributor.

7.	SUB-CONTRACTING	(Tick applicable box)	
7.1	Will any portion of the contract be sub-contracted?	YES NO	
7.1.1	If yes, indicate:		
	i) What percentage of the contract will be subcontracted% ii) The name of the sub-contractor		
R	Whether the sub-contractor is an EME or OSE	(Tick applicable box)	

Whether the sub-contractor is an EME or QSE Specify, by ticking the appropriate box, if subcontracting with an enterprise in terms of Professinal Procurement Regulations 2017: YES NO

Designated Group: An EME or QSE which is at last 51% owned by:	EME √	QSE √
Black people		
Black people who are youth	- Carpino	
Black people who are women		
Black people with disabilities		
Black people living in rural or underdeveloped areas or townships		
Cooperative owned by black people		
Black people who are military veterans		
OR		
Any EME		
Any QSE		

9.	DECLAR	ATION WITH REGARD TO COMPANY/FIRM	
9.1	Name	of company/firm:	
9.2	VAT re	gistration number:	
9.3	Compa	any registration number:	
9.4	TYPE	OF COMPANY/ FIRM (TICK APPLICABLE BO)	(]
		Partnership/Joint Venture / Consortium One person business/sole propriety Close corporation Company (Pty) Limited	
9.5	DESCI	RIBE PRINCIPAL BUSINESS ACTIVITIES	
9,6			
0.0		Manufacturer Supplier Professional service provider Other service providers, e.g. transporter, etc.	·
9.7	Total n	umber of years the company/firm has been in b	usiness:
9.8	l/we, th the B-l	ne undersigned, who is / are duly authorised to	do so on behalf of the company/firm, certify that the points claimed, based on graphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for
	i) T	he information furnished is true and correct;	
	ii) T	he preference points claimed are in accordance	with the General Conditions as indicated in paragraph 1 of this form;
	iii) In be	the event of a contract being awarded as a rese required to furnish documentary proof to the sa	sult of points claimed as shown in paragraphs 1.4 and 6.1, the contractor may atisfaction of the purchaser that the claims are correct;
	iv) If ha	the B-BBEE status level of contributor has beer ave not been fulfilled, the purchaser may, in add	n claimed or obtained on a fraudulent basis or any of the conditions of contract lition to any other remedy it may have –
	(a)	disqualify the person from the bidding process	s;
	(b)	recover costs, losses or damages it has incur	red or suffered as a result of that person's conduct;
	(c)	cancel the contract and claim any damages varrangements due to such cancellation;	which it has suffered as a result of having to make less favourable
	(d)	who acted on a fraudulent basis, be restricted	shareholders and directors, or only the shareholders and directors by the National Treasury from obtaining business from any organ after the audi alteram partem (hear the other side) rule has been
	(e)	forward the matter for criminal prosecution.	
		ESSES	SIGNATURE(S) OF BIDDERS(S)
	1		DATE:
	2		ADDRESS

Quotation Specification Committee

Tongaat CHC, 07 Sanele Nxumalo Lane Tongaat 4400 Tel: 032 944 5054 Fax: 032 9451210

TONGAAT COMMUNITY HEALTH CENTRE

SPEC NO:	QSN	
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ITEM / SERVICE DESCRIPTION

Supply of Sutures.

3. SCOPE OF WORK

The company to be awarded is anticipated to supply Sutures as per Specification below.

4. Full description of items to be supplied:

Item No:	Item Description	
2.1. 3200343	Sutures: Chromic Catgut (twisted absorber type). Size 2/0 – Taper point 75CM. Code: 220-32 – 3.5 Metric -40mm ½ Circle Box of 12 Pieces. Sterile and individually wrapped.	The Packaging Should reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved
2.2. 3213000	Sutures: Chromic Catgut (brown) 40mm ½ Circle Size 1- Reverse cutting. Code: 214RC Absorbable 75cm Metric 5. Box of 12 Pieces. Sterile and individually wrapped.	The Packaging Should reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved
2.3. 3272924	Sutures: 45cm-Monocryl 5/0. 3/8 Reverse Cutting - 13mm. Code: B32033. Box of 12 Pieces. Sterile and individually wrapped.	following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved.

Note:

The department reserves the right to request for an actual sample / send a picture of the item to be supplied from a potential supplier for quality testing / verification.

Authorized / Endorsed By Quotation Specification Committee

Initials and Surname	Portfolio	Signature
Mr. MC Malunga	Chairperson	Jazu Ja
Mr. TO Maphumulo	Member	
Mr. MT Mwandla	Member	() ()
Ms. MSE Mnguni	Member	
Mrs. V Rampersad	Member	



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SPEC NO: QSN	
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ITEM / SERVICE DESCRIPTION

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Supply of Sutures.

1. SCOPE OF WORK

The company to be awarded is anticipated to supply Sutures as per Specification below.

2. Full description of items to be supplied:

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Item No:	Item Description	
2.1. 3272800	Sutures: Nylon- 3/0 -6324RC-24mm 3/8 Circle – Reverse cutting – 45cm (METRIC 2)- Sterile- Blue monofilament. Nylon non-Absorbable. Box of 12 Pieces.	The Packaging Should reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved
2.2. 3272801	Sutures: Nylon- 2/0- 6230RC-30mm 3/8 Circle-Reverse cutting-75cm (METRIC 3) —Sterile-Blue monofilament Nylon non-Absorbable. Box of 12 Pieces.	The Packaging Should reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved
2.3. 3272860	Sutures: Nylon-4/0-840-17-25mm 3/8-25mm- Circle-Cutting-Blue 45cm USP(1.5 METRIC)-Sterile-monofilament Non-Absorbable surgical sutures- Box of 12 Pieces.	The Packaging Should reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved.

Note:

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Authorized / Endorsed By Quotation Specification Committee

Initials and Surname	Portfolio	Signature	\mathcal{A}
Mr. MC Malunga	Chairperson		Jul 30
Mr. TO Maphumulo	Member		() Byles
Mr. MT Mwandla	Member		119
Ms. MSE Mnguni	Member		,
Mrs. V Rampersad	Member		

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Fighting Disease, Fighting Poverty, Giving Hope



Quotation Specification Committee

Tongaat CHC, 07 Sanele Nxumalo Lane 4400 Tel: 032 944 5054 Fax: 032 9451210

TONGAAT COMMUNITY HEALTH CENTRE

SPEC NO	: QSN		
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ITEM / SERVICE DESCRIPTION

Supply of Sutures.

1. SCOPE OF WORK

The company to be awarded is anticipated to supply Sutures as per Specification below.

2. Full description of items to be supplied:

Item No:	Item Description	
2.1. 3272800	Sutures: Nylon- 3/0 -6324RC-24mm 3/8 Circle — Reverse cutting — 45cm (METRIC 2)- Sterile- Blue monofilament. Nylon non-Absorbable. Box of 12 Pieces.	The Packaging Should reflect the following: Name of Manufacture. Let Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved The Packaging Should reflect the
2.2. 3272801	Sutures: Nylon- 2/0- 6230RC-30mm 3/8 Circle-Reverse cutting-75cm (METRIC 3) –Sterile-Blue monofilament Nylon non-Absorbable. Box of 12 Pieces.	following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved
2.3. 3272860 ^V	Sutures: Nylon-4/0-840-17-25mm 3/8-25mm- Circle-Cutting-Blue 45cm USP(1.5 METRIC)-Sterile-monofilament Non-Absorbable surgical sutures- Box of 12 Pieces.	The Packaging Should reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the Item. Provide sample. Must be CE compliant / approved

Note:

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Authorized / Endorsed By Quotation Specification Committee

Initials and Surname	Portfolio	Signature
Mr. MC Malunga	Chairperson	Sit 20
Mr. TO Maphumulo	Member	
Mr. MT Mwandla	Member	111
Ms. MSE Mnguni	Member	,
Mrs. V Rampersad	Member	

Page 1 of 1

Fighting Disease, Fighting Poverty, Giving Hope



Tongaat CHC, 07 Sanete Nxumalo Lane Tongaat 4400 Tel: 032 944 5054 Fax: 032 9451210

Quotation Specification Committee

TONGAAT COMMUNITY HEALTH CENTRE

SPEC N	0:	QSN	
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ITEM / SERVICE DESCRIPTION

Supply of Sutures.

1. SCOPE OF WORK

The company to be awarded is anticipated to supply Sutures as per Specification below.

2. Full description of items to be supplied:

Item No:	Item Description	
2.1. 3212700	Sutures:	The Packaging Should-reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved
2.2. 3272922	Sutures: Vicryl Rapid 2/0- 3/8R. Code: V9380G. Box of 12 Pieces. Sterile and Individually wrapped	The Packaging Should reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved
2.3. 3272923	Sutures: Vicryl Rapid 3/0- 3/8R. Code: V9360. Reverse Cutting. Box of 12 Pieces. Sterile and Individually wrapped	The Packaging Should reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the Item. Provide sample. Must be CE compliant / approved

Note:

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Authorized / Endorsed By Quotation Specification Committee

Initials and Surname	Portfolio	Signature (/
Mr. MC Malunga	Chairperson	The said
Mr. TO Maphumulo	Member	July 1
Mr. MT Mwandla	Member	(O.D
Ms. MSE Mnguni	Member	
Mrs V Rampersad	Member	

Page 1 of 1

Fighting Disease, Fighting Poverty, Giving Hope

Quotation Specification Committee

Tongaat CHC, 07 Sanele Nxumalo Lane Tongaat 4400 Tel: 032 944 5054 Fax: 032 9451210

TONGAAT COMMUNITY HEALTH CENTRE

SPEC NO: QSN	
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ITEM / SERVICE DESCRIPTION

Supply of Sutures.

3. SCOPE OF WORK

The company to be awarded is anticipated to supply Sutures as per Specification below.

4. Full description of items to be supplied:

Item No:	Item Description	
2.1. 3200343	Sutures: Chromic Catgut (twisted absorber type). Size 2/0 – Taper point 75CM. Code: 220-32 – 3.5 Metric -40mm ½ Circle Box of 12 Pieces. Sterile and individually wrapped.	The Packaging Should reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved
2.2. 3213000	Sutures: Chromic Catgut (brown) 40mm ½ Circle Size 1- Reverse cutting. Code: 214RC Absorbable 75cm Metric 5. Box of 12 Pieces. Sterile and individually wrapped.	The Packaging Should reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the item. Provide sample. Must be CE compliant / approved
2.3. 3272924 ¹	Sutures: 45cm Monocryl 5/0. 3/8 Reverse Cutting – 13mm. Code: B32033. Box of 12 Pieces. Sterile and individually wrapped.	The Packaging Should reflect the following: Name of Manufacture. Lot Number. The date Manufactured. Clearly state the size. Expiry Date of the Item. Provide sample. Must be CE compliant / approved

Note:

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Authorized / Endorsed By Quotation Specification Committee

Initials and Surname	Portfolio	Signature //
Mr. MC Malunga	Chairperson	There of
Mr. TO Maphumulo	Member	17 14
Mr. MT Mwandla	Member	
Ms. MSE Mnguni	Member	
Mrs. V Rampersad	Member	